Only

## STATEMENT OF

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**FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Ryan-McCarthy Victory 320 First Street, SE ADDRESS (number and street) (Check if address is changed) Washington 20003 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS paul@pdscompliance.com (Check if address is changed) Optional Second E-Mail Address mgoode@pdscompliance.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2017 C00637298 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Kilgore, Paul, , , Type or Print Name of Treasurer Kilgore, Paul, , , [Electronically Filed] 04 10 2017 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
	ididate	Committee:	
(a)	H	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	<u>Ц</u>	This committee is an authorized committee, and is NOT a principal campaign committee. (Cominformation below.)	olete the candidate
Nam Can	ne of didate		
	didate y Affiliatio	Office on Sought: House Senate President	State
	,		District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Can	ne of didate		
Par	ty Con	nmittee:	
(d)			(Democratic, Republican, etc.) Party.
Poli	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nected organization is a
		Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate se committee. (i.e., nonconnected committee)	gregated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	nt Fund	raising Representative:	
(g)	×	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	RYAN FOR CONGRESS, INC. FEC ID number C C000	330894
	2.	PROSPERITY ACTION INC. FEC ID number C C003	377689
	3.	KEVIN MCCARTHY FOR CONGRESS FEC ID number C C002	20935
	4.	MAJORITY COMMITTEE PACMC PAC   FEC ID number C C004	28052

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Write or Type Committee Nam	ne	
Ryan-McCarthy	y Victory	
	Organization, Affiliated Committee, Joint Fundraising Representative, or Leader	ership PAC Sponsor
NONE		
<u> </u>		
Mailing Address		
Mailing Address		
		-
	CITY STATE	ZIP CODE
		Leadership PAC Sponso
Custodian of Records: Ide books and records.	entify by name, address (phone number optional) and position of the person in	possession of committee
Kilgore, F	Paul, , ,	
	824 S Milledge Ave Ste 101	
Mailing Address		
	Athens GA 30608	5
Title or Position	CITY STATE	ZIP CODE
Treasurer	706 Telephone number	534 - 7780
<b>Treasurer:</b> List the name an any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and the assistant treasurer).	name and address of
Full Name Kilgore, P	'aul, , ,	
Mailing Address	824 S Milledge Ave Ste 101	
	Athens GA 30605	
Title or Position	CITY STATE	ZIP CODE

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Full Name of Designated Agent Good	de, Michael, , ,	
Mailing Address	824 S Milledge Ave Ste 101	
	Athens GA 30	605 ZIP CODE
Title or Position Assistant Treasurer	Telephone number 706	- 534 - 7780
		holds accounts routs
safety deposit boxes of Name of Bank, Deposi		, Holds accounts, Tents
safety deposit boxes of Name of Bank, Deposi	r maintains funds. itory, etc.	, Holds accounts, Tents
safety deposit boxes of Name of Bank, Deposi	r maintains funds. itory, etc. ells Fargo	, Holds accounts, Tents
safety deposit boxes of Name of Bank, Deposi	r maintains funds. itory, etc.  ells Fargo  420 Montgomery St	104
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## FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

Page 5 FEC Form 1G (Revised 06/2011) List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ ADDITIONAL ] Name of Bank, Depository, etc. Mailing Address CITY 🗖 ZIP CODE 🛕 STATE **△** [ ADDITIONAL ] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Mailing Address **CITY** STATE . ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor [ ADDITIONAL ] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ ADDITIONAL ] Joint Fundraiser Participant **NRCC** C00075820 5. FEC ID number